

Application to Purchase Wild horses and Burros

Please e-mail the complete form to wildhorse@blm.gov or fax to 202-912-7182.

Attachment to Bill of Sale - Form 4710-23 (December 2012)

Name:	
Address:	
City State Zip:	Phone:
1. Are you affiliated with any group or organization? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Group's Name:	
Address:	
City, State, Zip:	Home Phone:
Alternative Phone:	E-mail address:
2. How many animals are you interested in? (1 to 35) (35 & more)	
3. Preferred Sex: Mares _____ Geldings _____ Stallions _____	
4. Preferred Age: 11 to 16 _____ 17 to 21 _____ 22 and older _____	
5. How many acres do you have available for the animals?	
6. What kind of facility? Corrals <input type="checkbox"/> Pasture <input type="checkbox"/> (Include detailed description)	
7. If pasture, describe your fencing:	
8. Do you have wild horse or livestock experience: Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, include detailed description)	

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9. How much feed do you have available? (Include detailed description)	Hay <input type="checkbox"/>	Grass <input type="checkbox"/>		
10. Do you understand the behavior of older wild horses? (Include detailed description)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
11. What is your source of water? (Include detailed description)	Tank <input type="checkbox"/>	Lake <input type="checkbox"/>	Stream <input type="checkbox"/>	Pond <input type="checkbox"/>
12. Will you have someone else responsible for the care of the animals? (If yes, include name, address, phone numbers, and e-mail address)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
13. Are you the owner of the property where the animals will be kept? (If not, please give all information about the property owner)			Yes <input type="checkbox"/>	No <input type="checkbox"/>
14. Do you understand the financial commitment to care for these animals?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
15. Do you have a regular Veterinarian available to provide care for your wild horses and/or wild burros?				

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Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, include name, address, phone numbers, and e-mail address)	
16. When would you be ready to pick up the purchased animal(s)? Date:	
17. What kind of transportation will you be able to provide for the animals? (Include detailed description) Gooseneck <input type="checkbox"/> Other <input type="checkbox"/> Note: No double decks (pots) are acceptable	
18. What is the intended use of the animals? Do you intend to resell these animals and if so, for what purpose: Yes <input type="checkbox"/> No <input type="checkbox"/> (Include a detailed description)	
19. Have you ever been convicted of abuse or inhumane treatment of animals? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, include detailed description)	
20. Have you ever adopted a horse or burro from the Bureau of Land Management? Yes <input type="checkbox"/> No <input type="checkbox"/>	
21. If non-profit, what is your status? 501(c)3 <input type="checkbox"/> Other <input type="checkbox"/>	
22. By applying to purchase wild horses and/or burros, I certify that I will provide humane care for such animals and will not sell or transfer ownership of any such animals that I purchase to any person or organization that intends to resell, trade, or give away such animals for processing into commercial products.	
Purchaser's Signature:	Date:
Purchaser's Printed Name:	